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FEDERAL EXPENDITURES FOR PUBLIC HEALTH

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MY training and experience naturally lead me to wish to impress you with the very great need for expansion of our federal as well as state and local programs for health conservation, but as I have listened today to President Harding and to the previous speakers I am inclined to revise my paper and mention briefly only those items of public health support which can not possibly be eliminated from our national budget without disastrous consequences. I, therefore, abandon my paper in favor of a brief answer to the four questions Professor Lindsay originally asked me.

In dealing with these questions we must attempt to define what we mean by public health, in order to have a common ground for discussion. We are all convinced everywhere that expenditures to avoid great outstanding dangers, such as cholera, yellow fever, plague and smallpox used to be and would be again today if we did not keep them under control, are proper charges against our federal funds for health administration. We believe that it is worth while to do what we can, by federal cooperation with the states and localities, to fight typhoid fever and diphtheria. We have become convinced that federal aid is needed in combating tuberculosis and the venereal diseases.

As we get farther and farther away from great emergencies, however, which the local public obviously cannot handle because of panic such as accompanies epidemics of influenza and poliomyelitis or because of ignorance of danger or the enormity and complexity of the problem as in the case of venereal diseases which I have mentioned, we grow more doubtful regarding the inclusion of activities under public health. For example, malaria and hookworm diseases are enormously important as causes of ill-health and inefficiency, but it is a

question in the minds of many as to whether the federal government should do very much with those diseases beyond research upon the best administrative measures. We find a wide divergence of opinion when we come to the question of including under public health the administration of pure food regulations, the control of water supplies, garbage and sewage disposal and the milk supply. Even greater divergence of opinion exists regarding whether medical inspection of school children, child hygiene, baby welfare and related questions belong to the field of public health. These things are all desirable; it is a question of where we draw our line in defining public health. In general everyone is agreed that the federal government should limit its activities to efforts which the states obviously cannot successfully make alone. And for that matter, it is agreed that states and communities ought also to limit their activities to those problems of health which the individual cannot solve for himself without endangering others.

It is my personal opinion, that we should first direct our efforts toward protecting the population against those diseases from which knowledge alone will not protect them. We may know about a good many of the diseases I have mentioned and yet not be able to protect ourselves or families. It happens that a great many diseases of this character have been brought under control by science, and pushed beyond the borders of this country. It would seem very clearly the duty of our government to protect us from the invasion from other countries of these diseases. Then we should continue federal participation in educating and training the public to protect its citizens from such diseases as smallpox, typhoid fever, diphtheria, or other diseases for which we have vaccines, antitoxins or other measures for providing individual immunity or prevention of serious infections after exposure. Such dangerous diseases cannot be limited by purely intra-state measures. Again epidemic or rare diseases from a public health point of view, such as influenza, rabies, poliomyelitis and a score of others, occur so infrequently in the average community that the provision of an adequate state personnel and equipment for combating them is prohibitive. We should maintain at federal expense a mobile force, so to speak, always available to aid the state authorities in dealing with such disease enemies.

The more general problems of food control, water supply protection, and similar measures are probably those which we should consider, if we are going to talk about retrenchment within the public health field as usually defined, because these activities may be taken care of in other ways. I would point out, however, that transfer of activities from one department or bureau to another is not necessarily attended by economy in expenditures. If we try to establish a general principle of division between federal and state expenditures for public health, I think it ought to be that the federal government should attempt nothing which the states can do for themselves. Secondly, if the federal government undertakes to cooperate with the states by way of nation-wide demonstrations in controlling special diseases that have been neglected as in the case of the venereal diseases, that cooperation should not be given unless it is reasonably certain that a permanent program will be carried out by the state after the demonstration is completed. Federal funds should be supplied plentifully for research to improve our present methods and our knowledge of application of scientific facts. Our limitation in this matter is still the most costly factor in our bills for ill health. Lastly, the government should be well enough equipped always to protect a given state from the invasion of disease from other states in which the local health machinery has broken down or is hopelessly inadequate as sometimes happens in great unexpected epidemics of communicable disease.

Without going into details, it will be useful to summarize the permanent health activities of our government which have been supported now for several years to the extent of approximately ten million dollars annually. The major divisions of this sum as expended by the U. S. Public Health Service and other federal bureaus are: (1) for regular activities \$5,000,000; for public health and related measures in special neglected fields which need federal aid for a series of years such as combating the venereal diseases, \$2,000,000, for emergency expenditures in controlling influenza and other great dangers \$1,000,000; for research \$500,000; for health information and education \$500,000; for general federal hospital care, not including any of the expenditures for ex-service men, \$1,000,000. These are not accurate figures, of course, but give us a rough total of ten

millions now expended by the federal government in promoting health throughout the nation.

As to Professor Lindsay's question regarding the evaluation of these expenditures, it is true, particularly of disease control, that the better the work, the less evidence there is discernible by the public regarding the value of the investment. If the Fire Department ran out every time we put down an epidemic, we would have a demonstration of how active our health departments are. This is as true of federal health work as it is of local work. Of course, we know what was done in stamping out smallpox in the Philippines after we took the islands. We know, for instance, in a state like Georgia or South Carolina that the loss through malaria has been greatly reduced. We know the epidemic of yellow fever in 1872 spread over this country and cost eighteen thousand lives and something like one hundred and seventy million dollars, while the epidemic in 1905 got under way apparently more effectively than the epidemic in 1872, but was stamped out with the loss of less than nine hundred lives and a saving of many millions of dollars. The control of the bubonic plague in San Francisco, without the loss of shipping and commerce, saved the nation billions of dollars. The saving of our children from such diseases as diphtheria and other diseases which were very prevalent in our parents' days and in our own childhood, can be calculated as a saving of millions upon millions more, besides the savings which cannot be stated in money.

These are purely speculative. If I had time, I think I could develop my reasons for making what seems to be an arbitrary statement—within the next ten years it is possible to save something like twenty-five per cent of our present federal outlay on the things we are now doing, through: (1) international cooperation and better policing of diseases not now in the United States, that is, the keeping of plague and cholera and typhus and other things out of this country, by better co-operation in handling these problems; (2) through individual precautions taken as the result of education in preventing the exposure of individuals to disease; and (3) through a steady increase of better conditions of housing, working, and play, which all have an enormous bearing on public health.

I believe, too, it is possible to save something like fifteen

per cent of the present federal outlay, through the assumption of expenditures by the state and local governments, which expenditures are now being made largely in the way of demonstration by the federal government. Lastly, it is possible to save something through reorganization and cooperation of all health agencies, both official and volunteer, by adoption of some such principle as has been voiced by the President and in the bills now pending in Congress for study and reorganization of federal health and welfare work.

Probably nothing which may be done now can change the immediate outlay, but by promoting better purchase value of each dollar devoted to public health we could, I imagine, in ten years reduce our present federal expenses for public health about fifty per cent. I say ten years; but I am confident that if we could double our present outlay of ten million dollars and make it twenty million immediately, we could get the reduction I speak of inside of five years. Therefore my plea would be to retrench in public health expenditures by immediate expansion of our expenditures, recognizing that this is not so much a matter of federal expense as of federal investment which will yield enormous profits to the next generation and even to ourselves.

In conclusion permit me to say that I believe I have based this statement upon sound and adequate data, which I have omitted in order to make more certain that the central idea which I present may remain unconfused in your memory.